RECEIVED

State of South Dakota

Candidate's or Committee's Report of Receipts and Expendit_

Candidates and candidate committees: File in the office where you filed your nominating petition. PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office, 500 E Capitol Ave., Pierre, SD 57501-5070 See pages 9 & 10 of the Guideline Book for specific instructions on completing this report. Name of Candidate or Committee Spink County Republicans Complete Mailing Address 509 W. 15t St. Redfield SD 57469 Name of Person Making Report Barb Lenling Daytime Phone Number (605) 472-1825 If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed. Type of Report (See pages 4 & 5 of Guideline Book) Political Committee For Reporting Period Ending (See pages 4 & 5 of Guideline Book) /0/23/04 The following verification must be completed before submitting report. VERIFICATION OF PERSON MAKING REPORT I Barb Len ling (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. Date: 10/24/04 Candidate Signature or Signature of Committee Treasurer or Chairperson Revised July 2001

Filed this day of

SECRETARY OF STATE

Name of Candidate or Committee_	Spirk	County	Republicans	
For the reporting period ending	10/23/04	ľ	/	

Schedule A – Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

itemized Contributions from Inc			*\$ <u>50.00</u>
mized Contributions from Indiv	idu al s		•
Name	Residence Address	Place of Employment (Name of Employer)	
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•		Appendix B
Name of Candidate or Committee	Spink County Republica	2nS
For the reporting period ending	10/23/04	
Schedule A	A – Direct Contributions (continued)	
		*\$ - 0 -
Unitemized Contributions from Political Part	ies:	. 4
temized Contributions from Political Parties	ı	
Party Name	Address	
		\$
		\$
Total of Itemized Contributions from Politic	al Parties:	*\$
	The state of the s	, 11t he ite—iced
temized Contributions from Political Action PAC Name	Committees (PAC's) - All contributions from PAC Address	's must be itemized.
TAC Name	7,444,645	\$
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Total of Itemized Contributions from Political Action Committees:

Total of All Direct Contributions (Sum of all lines with an *)

\$ 50.00

For the reporting period ending: 19/23/04 Schedule B - Fund-Raising Events Proceeds List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor gives more than \$100 in the calcodar year, those contributions must be itemized on Schedule A. Type or Name of Event Lincoln Day Dinner Active Candidates Forum Diedrich Guthering -27.80 Diedrich Guthering -27.00 Total: Schedule C - In Kind Contributions Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported. Nature of Non-Cash Contribution Name, Residence Address & Place of Employment Total: Schedule D - Other Income Use this schedule to report any refunds, interest carned or other income which is not a direct contribution. Source of Income Amount Total: T	Name of Candidate or Committee:	Spink County K	epublicans
List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor is more than \$100 in the calendar year, those contributions must be itemized on Schedule A. Type or Name of Event Linceln Day Dinner Peter the Candidates Forum Potentials Schedule C - In Kind Contributions Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported. Name, Residence Address & Place of Employment Schedule D - Other Income Use this schedule to report any refunds, interest earned or other income which is not a direct contribution. Source of Income Amount	For the reporting period ending:	10/23/04	,
Total: Schedule C - In Kind Contributions Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported. Name, Residence Address & Place of Employment Schedule D - Other Income Use this schedule to report any refunds, interest earned or other income which is not a direct contribution. Source of Income Amount	List on this schedule fund-raising events held to contributor gives more than \$100 or their contr	o raise money for the candidate and the	net proceeds derived from each event. If a
Diedrich Gathering -21.00 Diedrich Gathering -21.00 Total: Schedule C - In Kind Contributions Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported. Name, Residence Address & Place of Employment	Type or Name of Event		Net Proceeds
Diedrich Gathering -21.00 Diedrich Gathering -21.00 Total: Schedule C - In Kind Contributions Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported. Name, Residence Address & Place of Employment	Lincoln Day Dinne		257.46
Total: Schedule C - In Kind Contributions Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported. Nature of Non-Cash Contribution Name, Residence Address & Place of Employment Estimated Value Place of Employment Total: Schedule D - Other Income Use this schedule to report any refunds, interest earned or other income which is not a direct contribution. Source of Income Amount	Meet the Candida	tes Forum	27.80
Schedule C - In Kind Contributions Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported. Name, Residence Address & Place of Employment Estimated Value Place of Employment Total: Schedule D - Other Income Use this schedule to report any refunds, interest earned or other income which is not a direct contribution. Source of Income Amount	Diedrich Gathering		-21.00
Schedule C - In Kind Contributions Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported. Name, Residence Address & Place of Employment Estimated Value Place of Employment Total: Schedule D - Other Income Use this schedule to report any refunds, interest earned or other income which is not a direct contribution. Source of Income Amount	Total		2000
Schedule D - Other Income Use this schedule to report any refunds, interest earned or other income which is not a direct contribution. Source of Income Amount	contributor, residence address and place of emp	oloyment must be reported. Name, Residence Add	ress &
Schedule D - Other Income Use this schedule to report any refunds, interest earned or other income which is not a direct contribution. Source of Income Amount			
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Schedule D - Other Income Use this schedule to report any refunds, interest earned or other income which is not a direct contribution. Source of Income Amount	Total:		-0-
			e
Total: -0-	Source of Income		Amount
Total:			
	Total:		-0-

Name of Candidate or Committee:	Spink	County	Republicans	
For the reporting period ending:	10/23/04	σ	·	

 $\begin{center} \textbf{Schedule E} - \textbf{Expenditures} \end{center} \label{eq:expenditures}$

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Expenses		Contributions Made to Candidates and Comm	
Item	Amount	Name of Candidate or Committee	Amount
Advertising	89.80	SD Republican State Central Comm	750,00
Consulting		Brian Johnson	100.00
Postage	7.40	Norbert Barrie	100.00
Printing		Jane Pearson	100.00
Rent			
Salaries			
Telephone			1
Travel			
Utilities			
	List other expense amounts below		
ampaign Training			
Reagan Print			
frame	90.00		
			
			
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Name of Candidate or Committee: For the reporting period ending:	Spink County	Republicans	
For the reporting period ending:	10/23/04	,	
Sch This schedule is to report all of the candidate's has been contracted but not billed, estimate the	edule F - Debts and Oblicampaign obligations which are un amount of the obligation.	igations paid at the end of the repor	ting period. If a service
Owed to:	Purpose:		Amount
			- <u></u>
		2	
			<u> </u>
Total Obligations			<u> </u>
Total Obligations:			

Na	me of Candidate or Committee: $\leq e$	»ink	Count	<u> </u>	Republicans	
	r the reporting period ending: 10/2			<u> </u>	_	
Thi from	s summary sheet will give a brief outline of all can in the schedules previously completed.		mmary P		ring this reporting period	. Please transfer all totals
1.	Amount on hand, if any, at the beginning	g of tl	ne reporting	perio	od:	\$ 1,020.96
2.	Receipts					
	Schedule A - Direct Contributions	\$_	50.00	2		
	Schedule B - Fund-Raising Events	\$_	264.40	<u> </u>		
	Schedule C - In Kind Contributions	\$_	· <u> </u>			
	Schedule D - Other Income	\$_	·			
	Total of all Receipts	\$_	314.4	<u>6</u>		
3.	Total Monetary Receipts (A+B+D)					\$ <u>314.46</u>
4.	Candidate's Personal Contribution to Ov	vn Ca	mpaign			\$
5.	Monetary Loans to Candidate or Comm	ittee I	During Repo	orting	; Period	\$
6.	Monetary Loans Repaid During Reporti	ng Pe	riod			\$
7.	Expenditures - Schedule E					\$ 1,287.20
8.	Unpaid Obligations - Schedule F	\$_				
9.	Amount on hand at the close of this report. This should equal lines (1+3+4+5) - (6+3+4+5)		period. *			\$ <u>48.22</u>

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